

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

IA ETHICS AND
CAMPAIGN DISCLOSURE
Meter 5-29
2009 JUN -1 AM 11:01

COMMITTEE NAME (Must be same as on Statement of Organization)

HAGEMAN FOR STATE HOUSE

IMPORTANT: Indicate by # type of committee you are reporting for: 1

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

CARLIN HAGEMAN

Political Party (if applicable)

REPUBLICAN

Office Sought

STATE HOUSE

District (if Senate or House)

19

FORM

DR-2

(Rev. 07/2007)

DISCLOSURE
REPORT

For Office Use Only

Comm. #

Logged In

Scanned

Computer

Audited

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Paul R. Nielsen
SIGNATURE OF PERSON FILING REPORT

319-277-0820
TELEPHONE

2-20-09
DATE SIGNED

I AM FILING A 1-19-09 REPORT FOR (1) ELECTION /(2) NON-ELECTION YEAR.

(report date)

Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.) \$16,535.71

2,749.20

ADD TOTAL MONEY TAKEN IN THIS PERIOD

\$13,325.00

5,005.00

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL..... \$

7,754.20

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

\$13,442.91

6,490.40

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report balance must be zero) \$

1,263.80 ✓

****UNPAID BILLS** (From Schedule D - Attach Schedule D)..... \$

1,555.33 ✓

****IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)..... \$

14,760.46 ✓

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)..... \$

0.00

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ 0.00

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

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SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

HAGEMAN FOR STATE HOUSE

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
10-17-08	ID# 9775 CK# 1062	TEAM IOWA PAC 400 LOCUST STREET, SUITE 330 DES MOINES, IOWA		\$1500.00	<input type="checkbox"/>
10-21-08	ID# 6400 CK# 638	IOWA RESTAURANT ASSOC PAC 8525 DOUGLAS, SUITE 47 DES MOINES, IOWA		150.00	<input type="checkbox"/>
10-24-08	ID# CK# 1226	RICHARD VANDE KIEFT 3100 SHADY LANE CEDAR FALLS, IOWA		50.00	<input type="checkbox"/>
10-24-08	ID# CK# 460	MARVIN DIEMER 5026 BLUEBELL ROAD CEDAR FALLS, IOWA		100.00	<input type="checkbox"/>
10-24-08	ID# CK# 1368	RONALD L WHEELER 2421 SUNSET BOULEVARD CEDAR FALLS, IOWA		30.00	<input type="checkbox"/>
10-24-08	ID# CK# 2394	PAUL R NIELSEN 275 PAR DRIVE DIKE, IOWA		200.00	<input type="checkbox"/>
10-24-08	ID# CK# 6741	GAYLE A JUHL 19139 GRUNDY ROAD HUDSON, IOWA		100.00	<input type="checkbox"/>
10-24-08	ID# 9778 CK#	IOWANS FOR FREEDOM PAC 12834 CARPENTER TRAIL CARLISLE, IOWA		1000.00	<input type="checkbox"/>
10-24-08	ID# 9771 CK# 1001	IOWANS FOR RIGHT TO WORK PAC 4225 FLEUR DRIVE, SUITE 122 DES MOINES, IOWA		1500.00	<input type="checkbox"/>
10-31-08	ID# CK# 1739	EDWARD J HOOD PO BOX 67 CEDAR FALLS, IOWA		100.00	<input type="checkbox"/>
SUB-TOTAL 513 100.00				\$ 4730.00	
TOTAL (if last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Reset Form

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

HAGEMAN FOR STATE HOUSE

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10-15-08	ID# CK# 1030	REPUBLICAN PARTY IOWA 621 EAST 9TH DES MOINES, IOWA	RADIO & TV ADS	\$ 1500.00
10-16-08	ID# CK# 1031	UNIVERSITY BOOK & SUP 1009 W 23RD STREET CEDAR FALLS, IOWA	FED EX POSTAGE	19.49
10-28-08	ID# CK# 1032	U S POST OFFICE 221 W 6TH STREET CEDAR FALLS, IOWA	POSTAGE	550.00
10-29-08	ID# CK# 1033	U S POST OFFICE 221 W 6TH STREET CEDAR FALLS, IOWA	POSTAGE	412.58
10-29-08	ID# CK# 1034	U S POST OFFICE 221 W 6TH STREET CEDAR FALLS, IOWA	POSTAGE	1000.00
10-29-08	ID# CK# 1035	U S POST OFFICE 221 W 6TH STREET CEDAR FALLS, IOWA	POSTAGE	157.55
10-30-08	ID# CK# 1036	U S POST OFFICE 221 W 6TH STREET CEDAR FALLS, IOWA	POSTAGE	377.94
10-30-08	ID# CK# 1037	KAREN'S PRINT RITE 2515 FALLS AVENUE WATERLOO, IOWA	PRINTING	24.08
516 1972.15 SUB-TOTAL				\$ 4041.64
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

HAGEMAN FOR STATE HOUSE

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10-30-08	ID# CK# 1038	U S POST OFFICE 221 W 6TH STREET CEDAR FALLS, IOWA	POSTAGE	\$ 1354.30
10-31-08	ID# CK# 1039	U S POST OFFICE 221 W 6TH STREET CEDAR FALLS, IOWA	POSTAGE	300.00
10-31-08	ID# CK# 1040	U S POST OFFICE 221 W 6TH STREET CEDAR FALLS, IOWA	POSTAGE	50.69
10-31-08	ID# CK# 1041	U S POST OFFICE 221 W 6TH STREET CEDAR FALLS, IOWA	POSTAGE	743.77
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 2448.76
TOTAL (if last page of this schedule) 518 4420.91				\$ 6490.40

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

HAGEMAN FOR STATE HOUSE

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

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SCHEDULE D (Rev. 08/98)	INCURRED INDEBTEDNESS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD
(DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
8-18-08	OP PRINTING 2610 PARK AVENUE MUSCATINE, IOWA	NOTEPADS	\$ 1,555.33
SUB-TOTAL			\$ 1,555.33
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 1,555.33

*If actual figure is unknown, show "estimated" beside the figure.

Page 1 of 1
(for Schedule D)

CANDIDATE COMMITTEES NOTE:

*Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)
HAGEMAN FOR STATE HOUSE

Reset Form

SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
12-1-08	REPUBLICAN PARTY OF IOWA 621 EAST 9TH DES MOINES, IOWA		PAID BILL OWED ANTHEM MEDIA	\$ 12,249.08	<input type="checkbox"/>
12-15-08	REPUBLICAN PARTY OF IOWA 621 EAST 9TH DES MOINES, IOWA		PAID BILL OWED JDK MARKETING	2,511.38	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$ 14,760.46

TOTAL (if last page of this schedule) \$ 14,760.46

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule E)